

Appl. No. 10/648,022
Amdt. Dated May 5, 2005
Reply to Office March 8, 2005

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2816
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit	: 2816	Customer No.:	26794
Examiner	: Kenneth B. Wells	Confirmation No.:	3501
Serial No.	: 10/648,022	Docket No.:	17987 [TYC-02-1522R]
Filed	: August 26, 2003	Dated:	May 5, 2005
Inventors	: Christopher N. Brindle		
Title	: SERIES/SHUNT SWITCH		
	: AND METHOD OF CONTROL		

Mail Stop AF

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Certificate of Mailing Under 37 CFR 1.8

For

Postcards (2)

After-Final Amendment Transmittal, in duplicate
After-Final Amendment

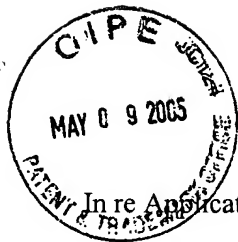
I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to the **Mail Stop AF**, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date appearing below.

Name of Applicant, Assignee, Applicant's Attorney
or Registered Representative:

DLA Piper Rudnick Gray Cary US LLP

By: 

Date: 5.5.05



Attorney Docket No.: 17987

In re Application of Christopher N. Brindle

Serial No.: 10/648,022

Filed: August 26, 2003

For: SERIES/SHUNT SWITCH AND METHOD OF CONTROL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.
- ☐ A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)

(Col. 2) (Col. 3)

SMALL ENTITY

OTHER THAN
SMALL ENTITY

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PRE- VIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	* 13	-	** 23=	0
INDEP.	* 5	-	** 6=	0
Application Size Fee				
First Presentation of Multiple Dependent Claim				

RATE	ADD'L FEE
x 25 =	\$
X 100 =	\$
	\$
+180=	\$

OR

RATE	ADD'L FEE
x50 =	\$
x 200 =	\$
x250=	\$
+360=	\$

TOTAL ADDITIONAL FEE \$_____ OR \$0

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge my Deposit Account No. 50-2719 in the amount of \$_____.
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$_____ is attached.
- ☐ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2719. A duplicate copy of this sheet is enclosed.
- ☒ Any filing fees under 37 CFR §1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR §1.17 with the exception of the Issue Fee which we intend to pay by check.

Respectfully submitted,



Darius C. Gambino
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